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Toshihiko Yos ** CONTINUING DA This applicatio ** FOREIGN APPLIC	anabe, Toyonaka-shi, JA nioka, Hirakata-shi, JAPA FA ***********************************	AN; * 04807 04	4/16/2003					
Foreign Priority claimed 35 USC 119 (a-d) conditions met Allowance Verified and Acknowledged Examiner's Signature ADDRESS 000513			STATE OR COUNTRY JAPAN	SHEETS DRAWING 18		TOTAL CLAIMS 31		INDEPENDENT CLAIMS 7
TITLE	n supporting device, inje	ctor, and	I health manag	ement	support	ing syste	em	
RECEIVED No.	ES: Authority has been given in Paper b to charge/credit DEPOSIT ACCOUNT c for following:				All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) 1.18 Fees (Issue) Other Credit			